

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **Image segmentation in a volume data set**
the specification of which (check only one item below):

☐ is attached hereto.

☐ was filed as United States application

Serial No _____

on _____

and was amended

on _____

☒ was filed as PCT international application

Number PCT/IB2004/052569

on November 26, 2004

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.


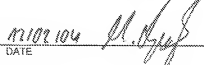
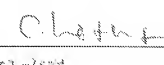
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	031 04 570.1	8 December 203	YES

U.S. DEPARTMENT OF COMMERCE—Patent and Trademarks Office
(July 1994)

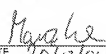
Combined Declaration For Patent Application and Power of Attorney (Continued) <small>(Includes Reference to PCT International Applications)</small>				Attorneys Docket Number PHDE030407 US
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)				
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245				Direct Telephone Calls to: (name and telephone number) (914)332-0222
201	FULL NAME OF INVENTOR	FAMILY NAME BUELOW	FIRST GIVEN NAME Thomas	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Grosshansdorf	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Ahrensfelder Weg 36 b		
202	FULL NAME OF INVENTOR	FAMILY NAME GRASS	FIRST GIVEN NAME Michael	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Buchholz in der Nordheide	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Theodor-Storm-Weg 35 c		
203	FULL NAME OF INVENTOR	FAMILY NAME LORENZ	FIRST GIVEN NAME Christian	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Hamburg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Schmueserstraße 21		
204	FULL NAME OF INVENTOR	FAMILY NAME MANZKE	FIRST GIVEN NAME Robert	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Husberg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Hasenredder 31		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.				
SIGNATURE OF INVENTOR 201 		SIGNATURE OF INVENTOR 202 		SIGNATURE OF INVENTOR 203 
DATE 12-02-2004		DATE 12/02/04		DATE Dec-2-2004
SIGNATURE OF INVENTOR 204 		DATE 		

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	POST OFFICE ADDRESS	POST OFFICE ADDRESS Ahrensfelder Weg 36 b	CITY 22927 Grosshansdorf	STATE & ZIP CODE/COUNTRY Germany	
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	POST OFFICE ADDRESS	POST OFFICE ADDRESS Theodor-Storm-Weg 35 c	CITY 21244 Buchholz in der Nordheide	STATE & ZIP CODE/COUNTRY Germany	
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204	FULL NAME OF INVENTOR	FAMILY NAME MANZKE	FIRST GIVEN NAME Robert	SECOND GIVEN NAME	
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	POST OFFICE ADDRESS	POST OFFICE ADDRESS Hasenredder 31	CITY 24620 Husberg	STATE & ZIP CODE/COUNTRY Germany	

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE
SIGNATURE OF INVENTOR 204		
		
DATE 2012/04		

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